Under the Paperwork Reduction And or 1985, his persons are reduced to respond to a collection of information unless in allertains of the persons are reduced to respond to a collection of information unless in allertains of the person of information unless in allertains a valid ONE control number. PATENT APPLICATION FEE DETERMINATION RESERVE Substitute for Forth PTO-876 Philaellon of Dooket Humber APPLICATION AS FILED - PART ! (Oolumn 1) (Colymn 2) OTHER THAN ... EMALL BUTITY FOR HUMBER FILED BABIO FEE 187 OFR 1,16(4):(b); or (c)) NUMBER EXTRA RATE (\$) FEE (\$) · N/A RATE (*) FEE (1) . NA BEARCH FEE MI OFFIT LIGHT, ID, OI (INVI · NA N/A N/A NA EXAMINATION FEE AT OFFI CIE(0), (P), of (Q) ANA. NA NA N/A EMIALO JATOT HIA 67 OFR 1.1601 NA minus 20 = MOEPENDENT CLAIMS BY CFR 1.15(N) EB: = OR 50 minus s. If the specification and drawings exceed 100 x 105 = 210 = APPLICATION SIZE cheels of paper, the application size lee due ls \$250 (\$130 for small entity) for each additional 50 sheets or traction thereof. See (97 OFR 1.16(5)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.18(1)) 185 I the difference in column 1 is less than zero, enter "o" in column 2. 370 TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) OTHER THAN CLAIMS . SMALL ENTITY HIGHEST HUMBER PREY LOUSLY PAID FOR SMALL ENTITY PRESENT EXTRA AFTER MENDMENT RATE (\$) · AGDI RATE (\$) ADDI: TIONAL FEE (\$) Total: Minus TIONAL FEE (\$) x 25 Andependent Of OFR LIGHT b_R Minus 50 Application Size Fee (37 CFR 1.16(5)) 105 210 .6 **OR** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II) (86 340 OR TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST NUMBER PRESENT EXTRA AFTER AMENDMENT PREVIOUSLY PAID FOR ADDI-TIONAL FEE (\$) RATE (\$) RATE (\$) ADDI-TIONAL MOMEN Total of City Minus FEE (\$) histopendeni Di Officiali x 25 Minus AMEN OR x 50 Application 8ke Fee (37 CFR-1.16(s)) 105 x: 210 OR. (Dal.) Ato Tr). Miajo Theohefed ejeltjum to Moitatheert tarif. OR ** I the entry in column 1 is less than the entry in column 2, write or in column 3.

** I the "Highest Number Previously Paid For" in This SPACE is less than 20, enter 20.

The Highest Number Previously Paid For II This SPACE is less than 3, enter 3.

The Highest Number Previously Paid For II Total or independent is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 OFR 1.16. The information is required to obtain or retain a Genetic by the public which is to file (and by the industry of the public which is to file (and by the industry of the public which is to file (and by the industry of the amount of the four equire to complete dependent to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450. TOTAL ADD'L FEE

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